

Tax	Reorganization Number Related	Department contact	A	B	C Number	verification Identity	verification
duties							y Done y Unfinished
Reason:	Source paper Issuance	Confirmation of date stamp on communication confirmation document					
Column:		year month day		Individual Number Card/Notification Card/Driver's License others()			

Tax office reception stamp

1040

Notification of opening or closing of a personal business (copy)

Tax place

•Address•Place of residence•Establishment, etc. (Please select the applicable one.)
()
(TEL)

Other than the above

If you have an address or place of business other than your tax place, please list it here.
()
(TEL)

Address •

Business offices, etc.

Furigana

Mr.

raw
year
month
day

•Taisho
•Showa
•Heisei
•Reiwa

Year, month, day of birth

personal number

* Your personal number will not be printed.

Occupation

Furigana

Shop name

Director of Tax Office

Submitted on month day, 1998

Year Month Day Submitted

Please notify us of the opening, closing, etc. of your personal business as follows:

Notification Category

• Starting a business (If you have taken over a business, please provide the address and name of the business you have taken over.)
address full name
Offices and business establishments (• new establishments, • expansions, • relocations, • closures)
• Reason for closure
(If the business has been taken over (transferred), please provide the address and name of the business to which it has been taken over (transferred).)
address full name

Type of income • Real estate income • Forest income • Business (agriculture) income [In case of business closure...• All • Part ()

Opening and closing dates, etc.

Date of new establishment or expansion of offices and business establishments Year Month day

Business establishments, etc.

New facility and new location (phone)

New facilities, relocation, In case of abolition Location before relocation/abolition

The reason for closure is legal

Founding corporation name Representative name

With the establishment of a person If it is Corporate tax place Registration of establishment day

Due to opening and closing of businesses

"Application for Approval of Blue Return" or "Notification of Cancellation of Blue Return" •Yes•No

Submission of notification form Presence or absence "Taxable business selection notification" or "Business termination notification" regarding consumption tax •Yes•No

Business Overview

Be as specific as possible I will describe it objectively.

salary Give etc. of support Payment of Condition abolition

Category Number of employees Wage determination Tax amount

Full- time staff •Yes•No

servant •Yes•No

•Yes•No

total

So of others three thoughts case term

Application for approval of special provisions for payment of withholding tax Whether to submit

• Yes • No Date of start of salary payment Heisei Year Month day

Tax accountant involved

(TEL)

Tax

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Tax accountant involved

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